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CONFIRMATION NO. 3631

Bib Data Sheet

|   |   |                                    |  |   |
|---|---|------------------------------------|--|---|
| <b>SERIAL NUMBER</b><br>10/807,594  | <b>FILING OR 371(c)<br/>DATE</b><br>03/24/2004<br><b>RULE</b>   | <b>CLASS</b><br>359                | <b>GROUP ART UNIT</b><br>2873  | <b>ATTORNEY<br/>DOCKET NO.</b><br>H-369 |
| <b>APPLICANTS</b><br>Richard M. Webber, Brookline, MA;<br>Thomas H. Whitesides, Somerville, MA;<br>Guy M. Danner, Somerville, MA;<br>Craig A. Herb, Medford, MA;<br>Charles H. Honeyman, Roslindale, MA;<br>Michael McCreary, Acton, MA;                      |   |                                    |  |   |
| <b>** CONTINUING DATA *****</b><br>This appln claims benefit of 60/320,050 03/25/2003 and claims benefit of 60/481,550 10/23/2003   |   |                                    |  |   |
| <b>** FOREIGN APPLICATIONS *****</b>  |   |                                    |  |   |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b><br><b>** 06/07/2004</b>  |   |                                    |  |   |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance<br>Verified and<br>Acknowledged |   | <b>STATE OR<br/>COUNTRY</b><br>MA  | <b>SHEETS<br/>DRAWING</b><br>15  | <b>TOTAL<br/>CLAIMS</b><br>30           |
| Examiner's Signature _____ Initials _____   |   | <b>INDEPENDENT<br/>CLAIMS</b><br>1 |  |   |
| <b>ADDRESS</b><br>26245   |   |                                    |  |   |
| <b>TITLE</b><br>PROCESSES FOR THE PRODUCTION OF ELECTROPHORETIC DISPLAYS  |   |                                    |  |   |
| <b>FILING FEE<br/>RECEIVED</b><br>1380  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                    | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of<br>time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |